15CV 5871

UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK 1 2015
SOUTHERN DISTRICT OF NEW YORK JULY 24 2015
PRO SE OFFICE
(Full name(s) of the plaintiff or petitioner applying (each person must submit a separate application)
CV () ()
-against- -against- (Enter case number and initials of assigned judges, if available; if filing this with your complaint, you will not be the perhapse a case number or assigned judges.)
ALR Cema WEUS, XDAA Moore, & DA L NEW Man.
Halava Higgens, DA Vana, ADA Malshy the
(Full name(s) of the defendant(s)/respondent(s).)
APPLICATION TO PROCEED WITHOUT PREPAYING FEES OR COSTS
I am a plaintiff/petitioner in this case and declare that I am unable to pay the costs of these proceedings and I believe that I am entitled to the relief requested in this action. In support of this application to proceed in forma pauperis ("IFP") (without prepaying fees or costs), I declare that the responses below are true:
1. Are you incarcerated?
Do you receive any payment from this institution? Yes You No
Monthly amount:
If I am a prisoner, see 28 U.S.C. § 1915(h), I have attached to this document a "Prisoner Authorization" directing the facility where I am incarcerated to deduct the filing fee from my account in installments and to send to the Court certified copies of my account statements for the past six months. See 28 U.S.C. § 1915(a)(2), (b). I understand that this means that I will be required to pay the full filing fee.
2. Are you presently employed? Yes No
If "yes," my employer's name and address are:
Gross monthly pay or wages: 140 mo Public A531 stone
If "no," what was your last date of employment?
Gross monthly wages at the time:
3. In addition to your income stated above (which you should not repeat here), have you or anyone else living at the same residence as you received more than \$200 in the past 12 months from any of the following sources? Check all that apply.
(a) Business, profession, or other self-employment (b) Rest payments, interest, or dividends (c) No No

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	(c) Pension, annuity, or life insurance payments
	(d) Disability or worker's compensation payments
	(e) Gifts or inheritances
	(f) Any other public benefits (unemployment, social security,
	rood sumps, velocum s, oto.)
	If you answered "Yes" to any question above, describe below or on separate pages each source of money and state the amount that you received and what you expect to receive in the future.
	FoodStamps
	If you answered "No" to all of the questions above, explain how you are paying your expenses:
4.	How much money do you have in cash or in a checking, savings, or inmate account?
	No bankacet
5.	Do you own any automobile, real estate, stock, bond, security, trust, jewelry, art work, or other
	financial instrument or thing of value, including any item of value held in someone else's name? If so, describe the property and its approximate value:
	N ≈
6.	Do you have any housing, transportation, utilities, or loan payments, or other regular monthly
	expenses? If so, describe and provide the amount of the monthly expense:
	defaulted on Student loans
7.	List all people who are dependent on you for support, your relationship with each person, and how
	much you contribute to their support (only provide initials for minors under 18):
8.	Do you have any debts or financial obligations not described above? If so, describe the amounts owed
	and to whom they are payable: So man - Student loins,
DX	landlord, Prachetors
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	claration: I declare under penalty of perjury that the above information is true. I understand that a false tement may result in a dismissal of my claims.
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	ted Signature
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Nai	me (Last, First, MI) Prison Identification # (if incarcerated)
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Add	dress City State Zip Code
Ll	410 676 1940 gracied vacied 2 egmilon
Telè	ephone Number E-mail Address (if available)

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